

North Carolina Department of Health and Human Services Division of Mental Health, Developmental Disabilities and Substance Abuse Services

Broughton Hospital

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VIA FACSIMILE (828) 299-8266

Ricardo Cruz-Segarra, District Supervisor NC Department of Labor Division of Occupational Safety & Health 204 Charlotte Highway, Suite B Asheville, NC 28803

RE: OSH Complaint No. 206153488

Dear Mr. Cruz-Segarra:

Broughton Hospital takes staff and patient safety very seriously. For a number of years we have been tracking and trending data relative to staff injuries due to patient aggression through our hospital's Safety and Health Committee, as well as our Environment of Care Committee, Performance Improvement function Committee, and our Human Resources Function Committee. Data from these studies have been used to assist in the decision making process for new programs, new techniques, and in modifications of staffing patterns in an effort to reduce the numbers of staff (and patient) injuries as a result of patient aggression.

I am sure that I do not need to remind you that our hospital is a state psychiatric hospital. By law, all of our patients must meet the criteria of being "dangerous to themselves or others" before they can be admitted. Therefore, due to the mission of our hospital it would be impossible to have a work environment free from any chance of physical aggression by our patients. Likewise, I do not know of any hospital – state or private – that would not say they could use more staff.

Reviewing the data collected from January, 2005 thru April, 2008 (the data from May, 2008 has not been aggraded at the time of this letter) relative to staff injuries as a result of patient aggression which required referral/treatment beyond the level of care provided at our employee treatment room, the following was concluded:

- Certified Nursing Assistants (CNA's) accounted for 91% of all staff injuries due to patient aggression.
- Since January, 2005 there has been a strong, steadily increasing trend of CNA nursing care days being deployed across the hospital.
- Since January, 2005 there has been a decreasing trend in the numbers of staff injury incidents per 1,000 CNA nursing care days.
- The data does not suggest a strong correlation between increasing staffing numbers and reductions of incidents resulting in injury (less staff does not necessarily translate into more staff injury).

From January, 2005 thru April, 2008, Broughton Hospital has been able to increase CNA staffing by 26.41%. This increase in CNA staffing was due to utilization of overtime hours, re-deployment of selected staff, contract nursing services, and gaining approximately 50 new CNA positions. During that same period, we saw a decreasing trend in the CNA staff injury incident rate due to patient aggression. Increases in staffing numbers may have had a slight impact on the reduction of the incident rate, but it is believed that several new training programs to help staff deal with patient aggression such as modifications to the NCI training, expanded deployment of "response teams" within the hospital, and the initiative to reduce emergency restrictive interventions has been the primary reason for the reduction of the incident rate.

The hospital's Safety and Health Committee reviews staff injury incidents due to patient aggression on a monthly basis. The incident data is collected from the hospital's employee incident reports and plotted as incidents per 1.000 CNA nursing care days. Run charts are used to display the data, with an established upper control limit being three standard deviations above the mean. Should the data plot above the control limit, the Safety and Health Committee conducts an analysis or "drill-down" of the data. While the overall data for the hospital has consistently remained within the established control limits, there are occasional "spikes" in the data that the Safety and Health Committee investigates. In almost all of the cases where spikes were noted, further study of the data indicated a special-cause variation resulting from "single patient/multiple incident cases" as the ultimate cause for the spike in incidents.

Broughton Hospital also takes seriously the employee's perception of the work environment. Under the charge of the hospital's Human Resources Function Committee and the Performance Improvement Function Committee, yearly staff satisfaction surveys are conducted. Staff are asked a series of questions, with the key question being "I am very satisfied with Broughton Hospital as a place to work." Staff are requested to rate their responses on a five point scale (I being unfavorable and 5 being favorable). Over the past four years response to the key question has been consistently ranked between a low of 76% and a high of 92% responses marked as "favorable".

In conclusion, while we feel that increased numbers of staff would most certainly enhance overall patient care services, we do not feel that present staffing numbers have led to a hostile working environment (as supported by the past four years of staff satisfaction survey reports), nor have present staffing numbers contributed to employees being assaulted by patients at any grater rate than what could normally be expected due to the nature of the hospital's mission (as supported by the data analyzed from the incident reports and staffing reports). Therefore, we respectfully disagree with the alleged violation as presented.

Should you have any questions concerning our response or the data provided as a basis of our evaluation, please let me know.

Sincerely,

William F. Brown, III

Safety Director

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